



Billing and Collections Policy

The purpose of this Billing and Collections Policy is to describe the approach of Emergency Physicians Professional Association (EPPA) in obtaining payment for care provided to patients. The Policy applies to care our team provides to you in one of the following environments:

1. a hospital; or
2. our Urgency Room clinics and telehealth services.

EPPA is committed to working with patients who are interested in additional payment options before initiating collection actions. In addition, for hospital-based visits, EPPA will honor those who qualify for hospital financial assistance through the respective hospital entity and those

ACTIONS EPPA MAY TAKE TO OBTAIN PAYMENT

Following a patient's visit, EPPA will submit a claim to the patient's insurance company, using information provided during visit registration. Once insurance has processed and responded to EPPA, the patient will receive a combination of text communications and reminders and/or paper statements. (Note: For patients who do not have insurance, EPPA will bill them directly, using a combination of text communications, reminders, and/or paper statements.)

EPPA may engage in collection activities for purposes of obtaining payment for care, including the following:

- Sending patient billing statements that include due and past due dates
- Attempting to negotiate a settlement of the amount owed
- Referring a patient account to a third-party debt collection agency or law firm, including for the purpose of commencing litigation to collect outstanding amounts
- Sending letters or making phone calls, either from EPPA, EPPA's collection agencies, or other agents within EPPA

The organization has zero tolerance for abusive, harassing, oppressive, false, deceptive, or misleading language or conduct by its debt collection attorney and agencies, their agents or employees, and EPPA employees responsible for collecting medical debt from patients.

EPPA and its debt collection attorneys and agencies will not report delinquent patients to credit bureaus.

EFFORTS TO DETERMINE ELIGIBILITY FOR ASSISTANCE OR DISCOUNTS

Hospital Financial Assistance

It is the responsibility of the patient/responsible party to notify EPPA about eligibility for financial assistance and provide the required documentation to verify eligibility.

Uninsured Discount



Uninsured patients will automatically be provided a self-pay discount on their bill. The adjustment is made to every encounter without insurance and is reversed if insurance is filed. Any patient payments received that equal more than the balance after the adjustment, are to be refunded to the patient.

Prompt Pay Discount

If a prompt pay discount is requested by the patient, EPPA vendor may offer a discount off current balance on the encounter if the encounter is paid in full.

Payment Arrangements

EPPA will consider and authorize reasonable payment arrangements. Such agreements involve permission to withdraw an automatic monthly amount for a designated period. Such authorizations will require electronic or paper signature.

USE OF COLLECTION AGENCIES

Unpaid patient accounts will be referred to a collection agency at the conclusion of the statement cycle if a balance remains. The collection process may result in referring the patient's account to a third-party debt collection agency.

EPPA will do the following to monitor relationships with all third-party debt collection agencies:

- Maintain a written contract with any debt collection agency utilized to collect debt from patients.
- The contract will require the debt collection agency to act in accordance with the terms of the agreement, applicable laws, and this Policy.
- Have patient accounts reviewed by the appropriate authorized individual before referral to a debt collection agency.

Files referred to a law firm are authorized for suit and may likely result in a lawsuit if not resolved.